

From Phantom to Phantom-Free: "AnatomIQ" an Automated CT Quality Assessment without Physical Calibration

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Disclosures

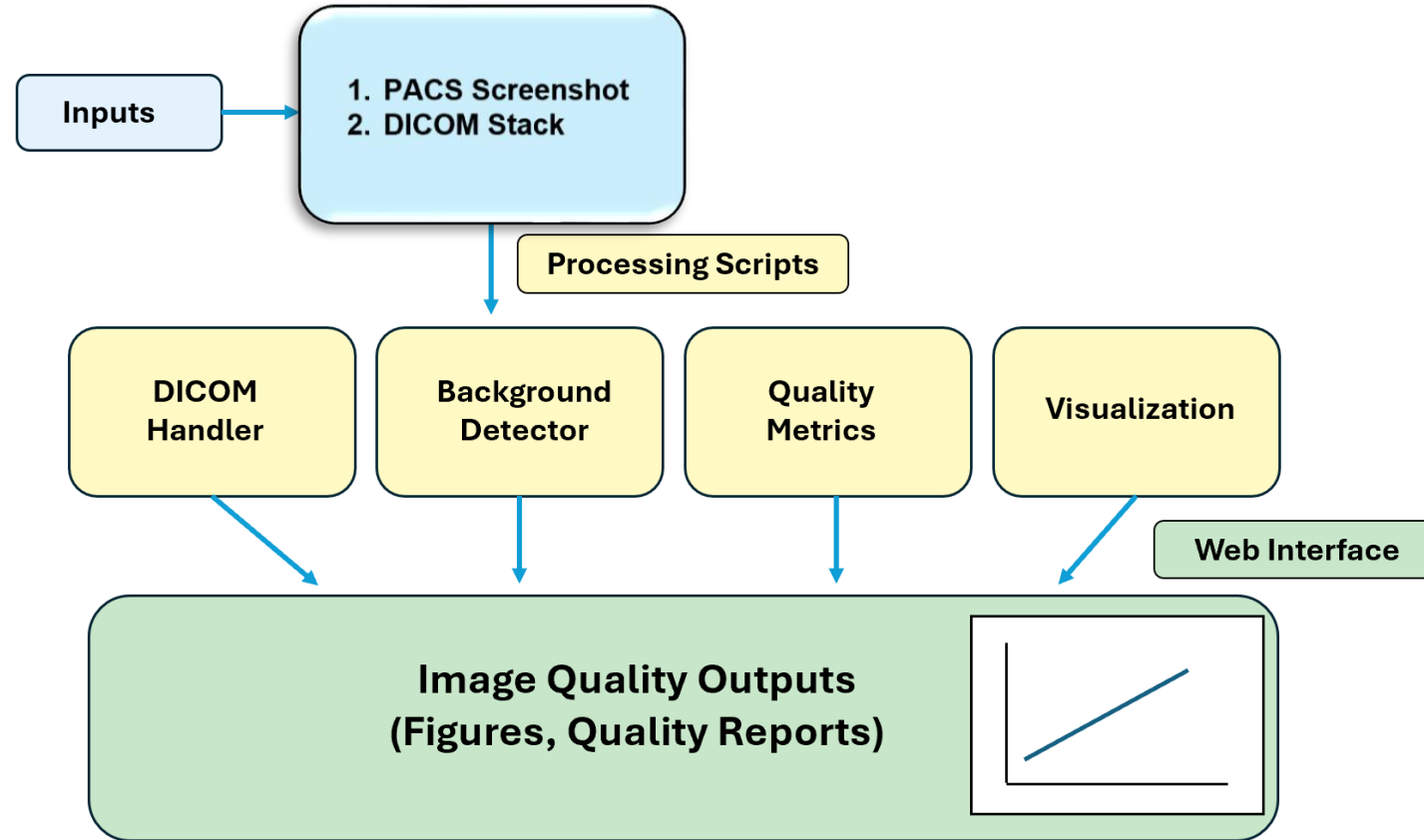
- R. Carballeira, H. Cash, M. Robins: Provisional patent application pending for AnatomIQ automated CT image quality assessment methodology.
- No financial conflicts of interest to disclose.

Motivation

- Why Current CT Quality Assessment Falls Short
 - Manual background ROI selection → >15% inter-operator variability in CNR
 - NPS and TTF require dedicated phantom acquisitions → extra radiation, cost, workflow disruption
 - Manual PACS-to-DICOM coordinate transcription → 10–20+ min/case, impractical for routine monitoring

The Pipeline

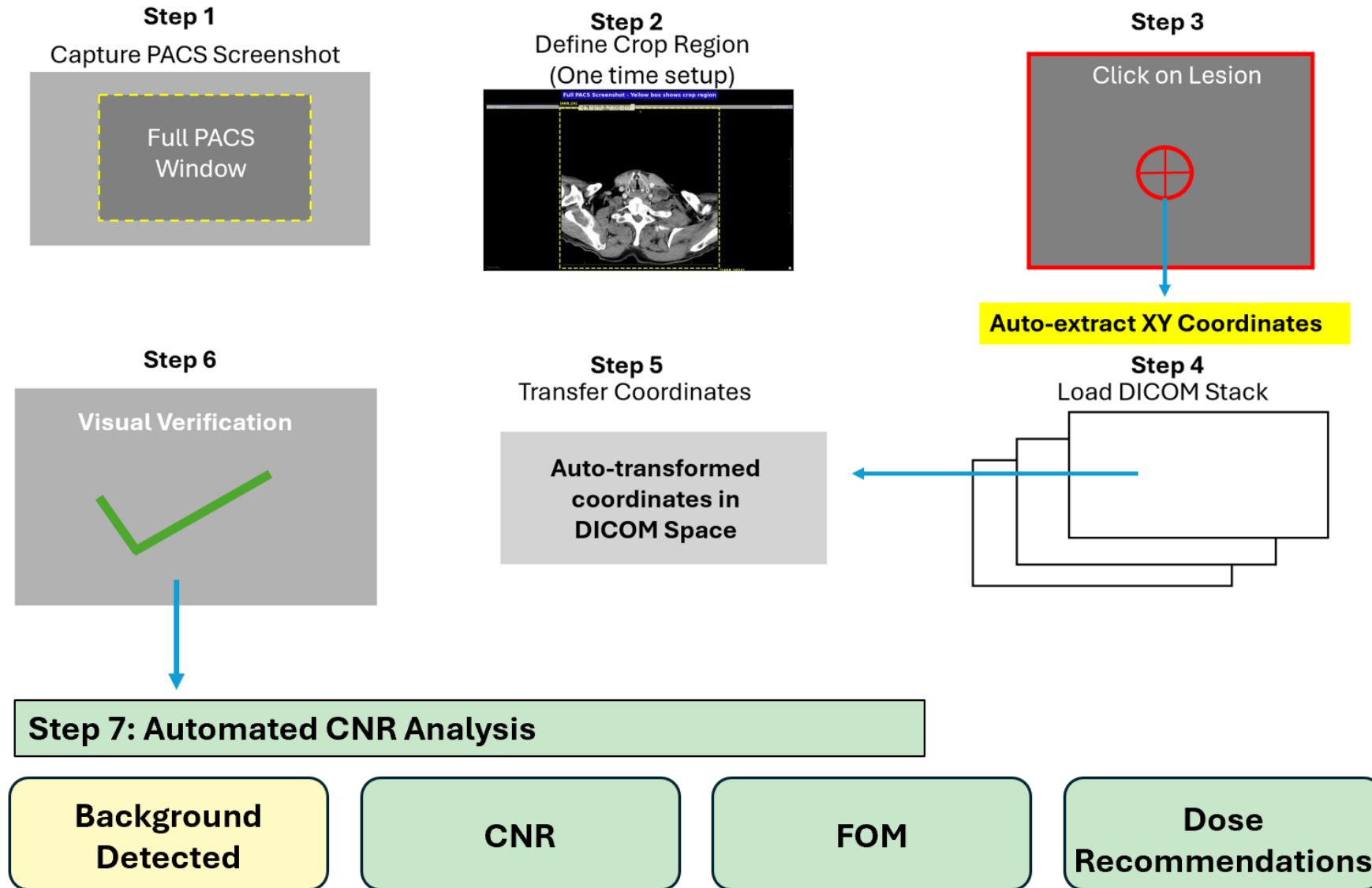
System Architecture



1. PACS Screenshot

2. DICOM Stack

PACS Integration Workflow



Total time: ~2-3 minutes per case

Set crop region once for your PACS system, then use for all patients!

Upload Screenshot

PACS Screenshot (PNG, JPG)

×

Row 131 Slice 69.png434.7 KB ↓

Load Screenshot

Status

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SCREENSHOT LOADED

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File: Row 131 Slice 69.png

Full Size: 1936 x 1048

AUTO-CENTERED CROP REGION:

Top-left: (468, 24)

Bottom-right: (1468, 1024)

Size: 1000 x 1000

Full Screenshot (with crop region)

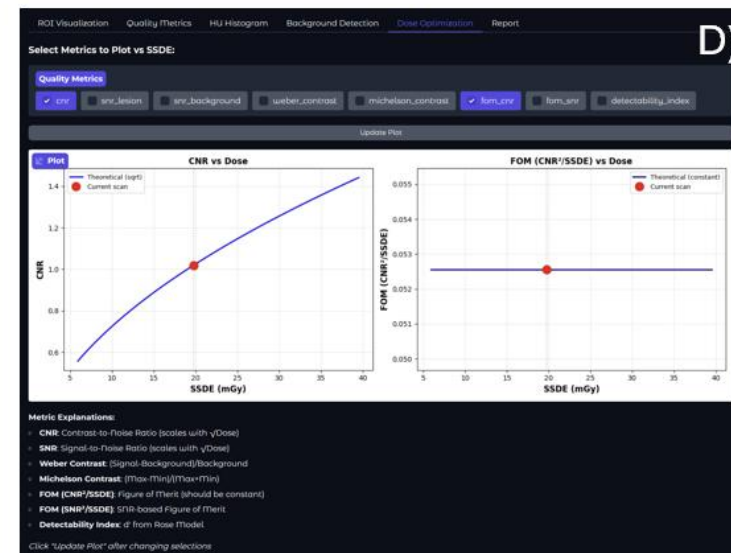
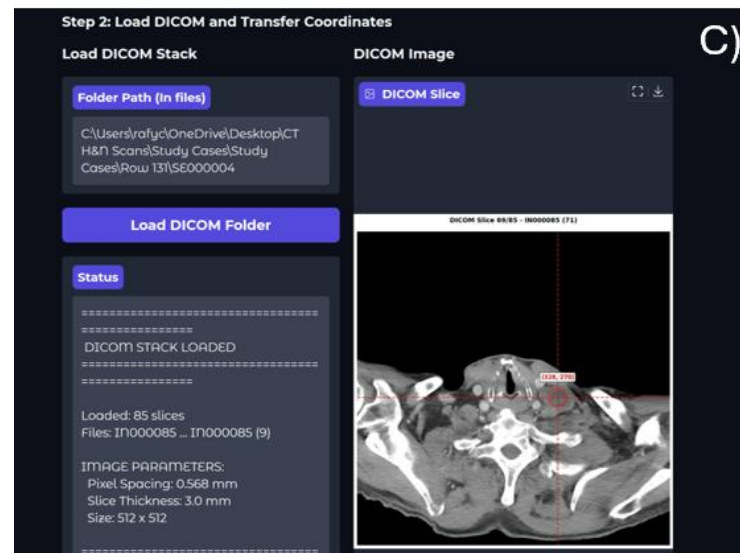
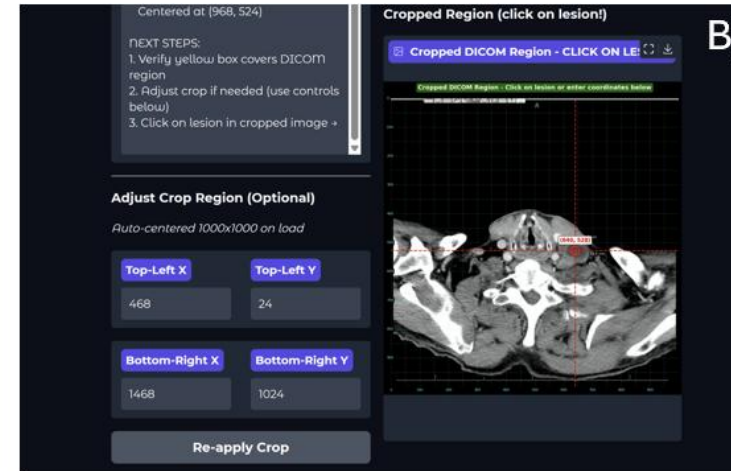
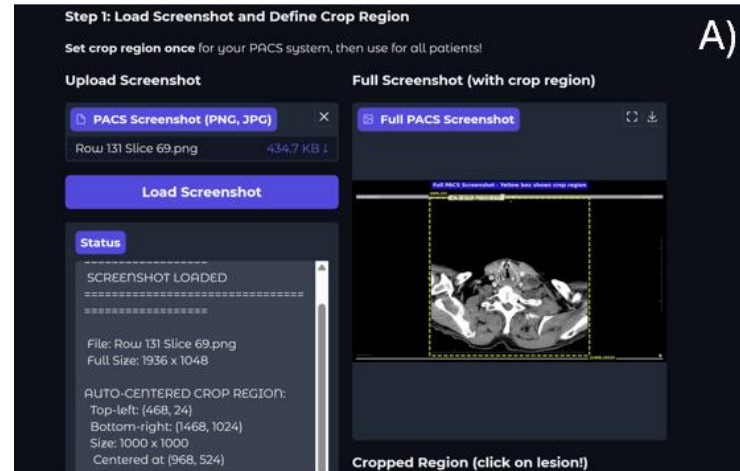
Full PACS Screenshot

⌵ ⌵

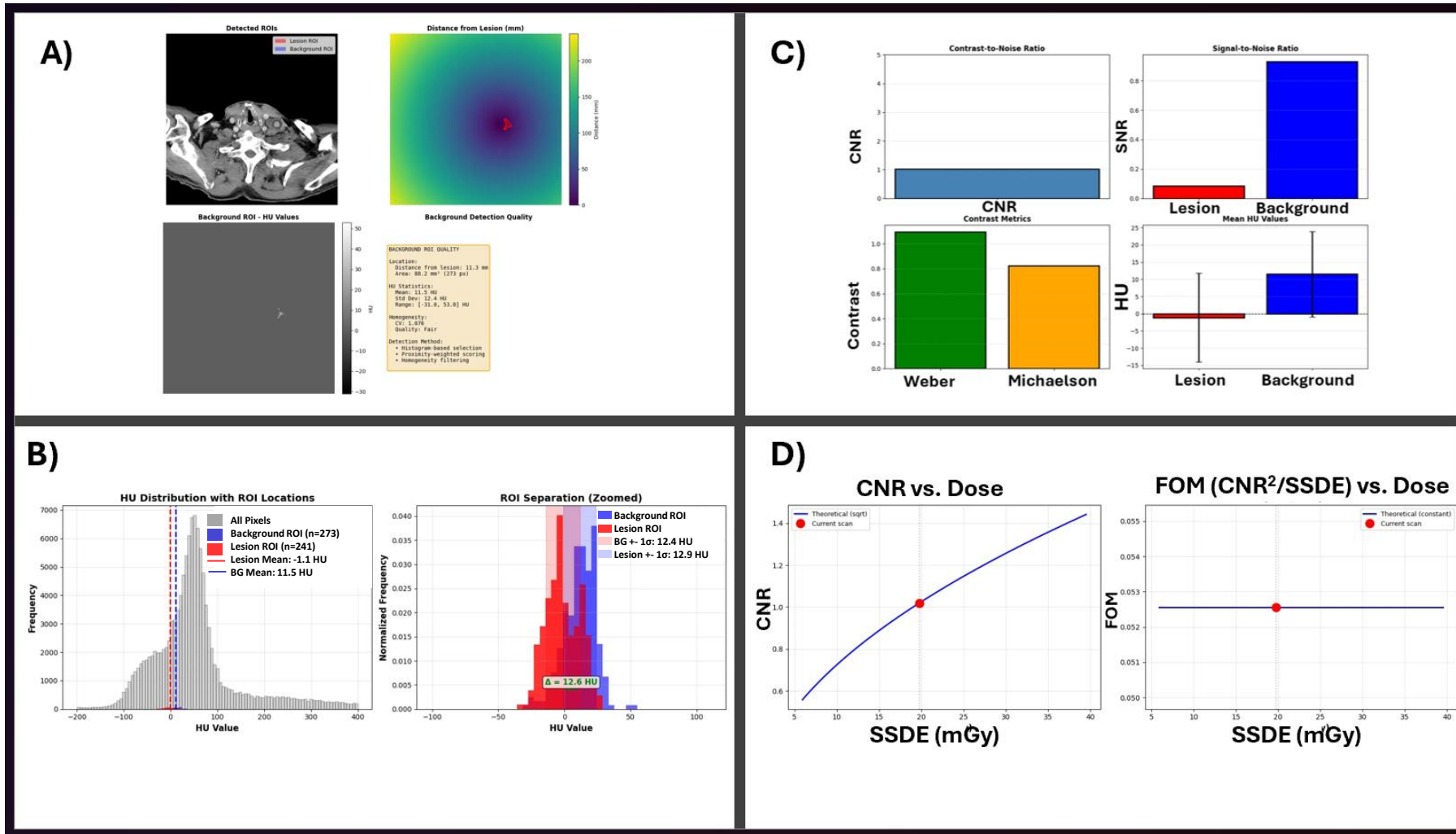
Full PACS Screenshot - Yellow box shows crop region



User Interface



Hounsfield Unit Histogram Analysis

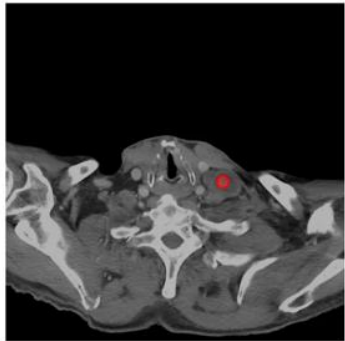


Automated Background Detection

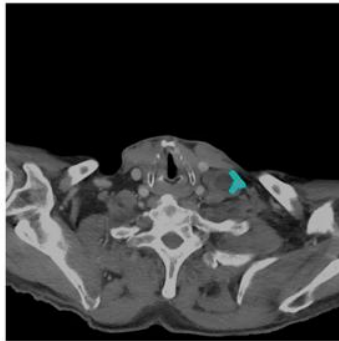
HU-adaptive thresholding: tissue-matched background for fat, soft tissue, and dense tissue

A)

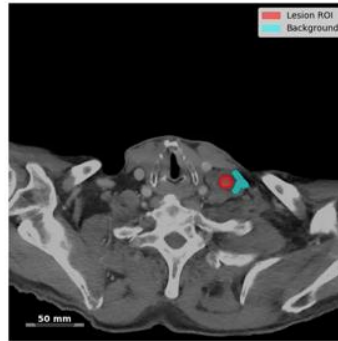
Lesion ROI



Detected Background

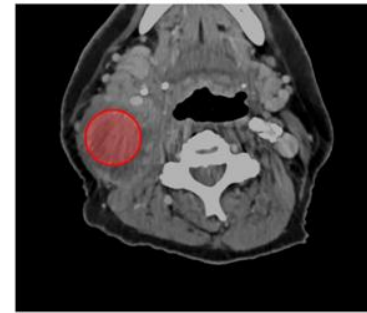


Combined View

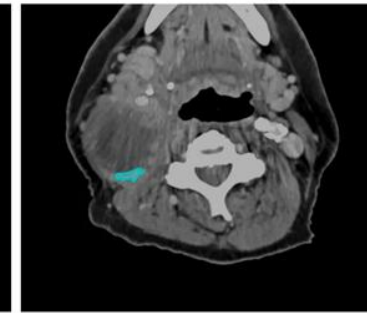


B)

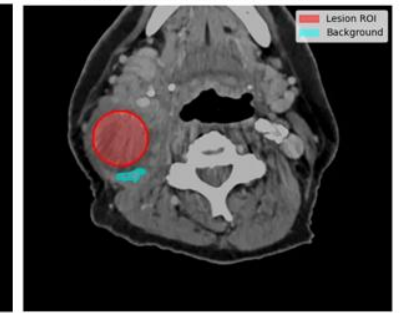
Lesion ROI



Detected Background



Combined View

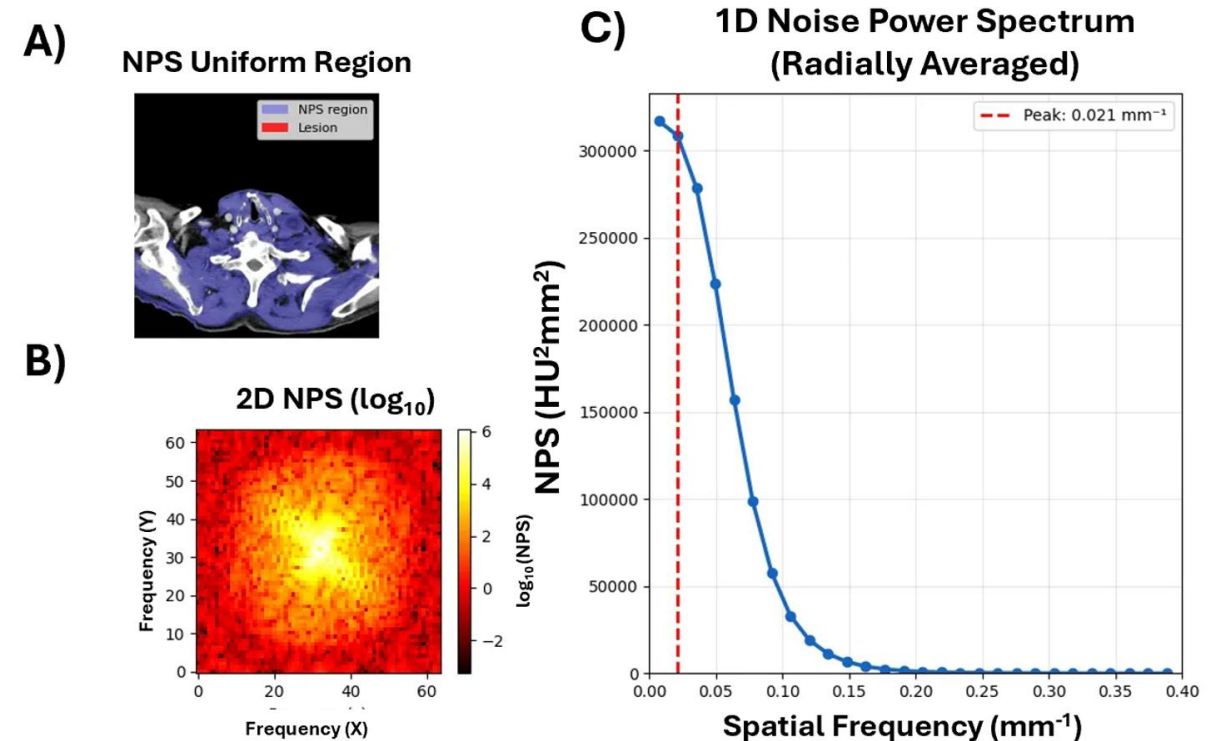


Quality flags: GOOD / WARNING / FAILED

Phantom-Free Noise Power Spectrum

- NPS reveals noise texture in the spatial frequency domain — SD alone cannot distinguish fine vs. coarse noise
- Algorithm: auto-identify uniform tissue from CNR background mask $\rightarrow$ 64×64 ROIs $\rightarrow$ 2D FFT with Welch windowing $\rightarrow$ radially-averaged 1D NPS in $\text{HU}^2 \cdot \text{mm}^2$
- Output: peak spatial frequency $\rightarrow$ FINE / MODERATE / COARSE texture classification
- Validation: 218 cm^2 uniform region, peak freq $0.021 \text{ mm}^{-1} \rightarrow$ coarse texture (consistent with smooth kernel)

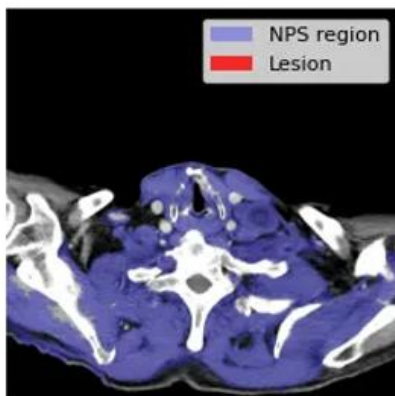
Noise Power Spectrum (NPS) Analysis



Noise Power Spectrum (NPS) Analysis

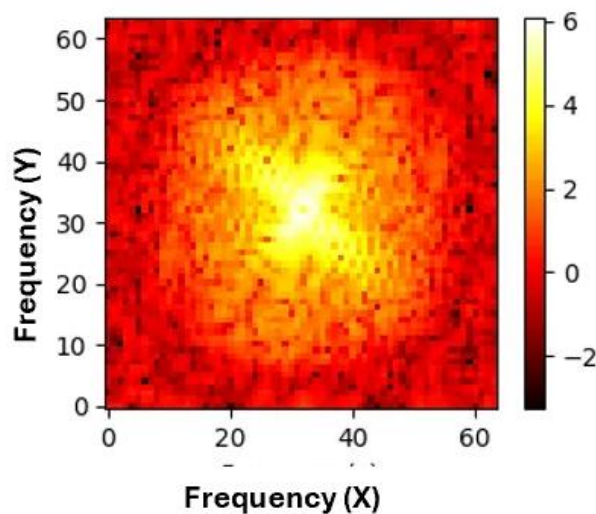
A)

NPS Uniform Region



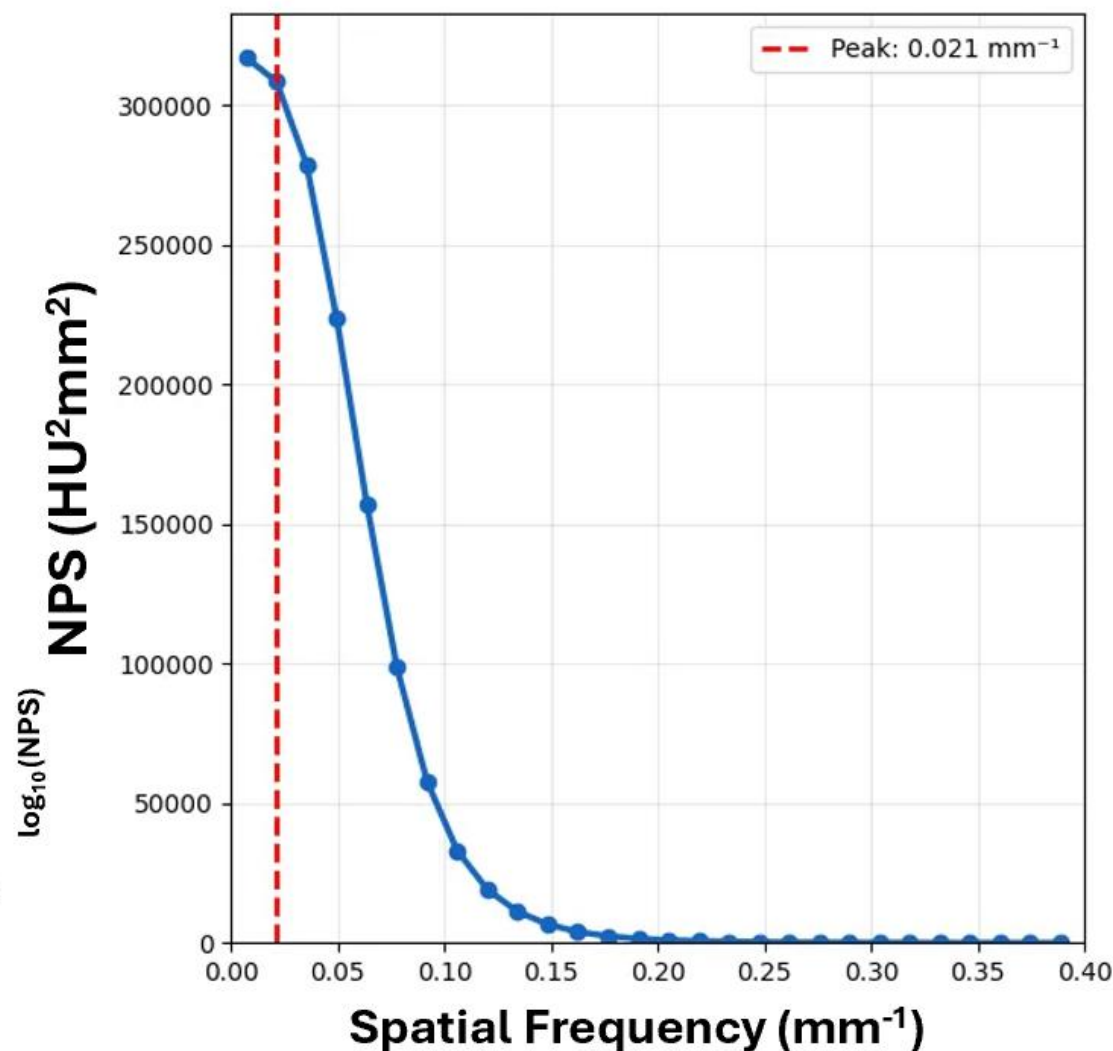
B)

2D NPS ($\log_{10}$)



C)

1D Noise Power Spectrum
(Radially Averaged)



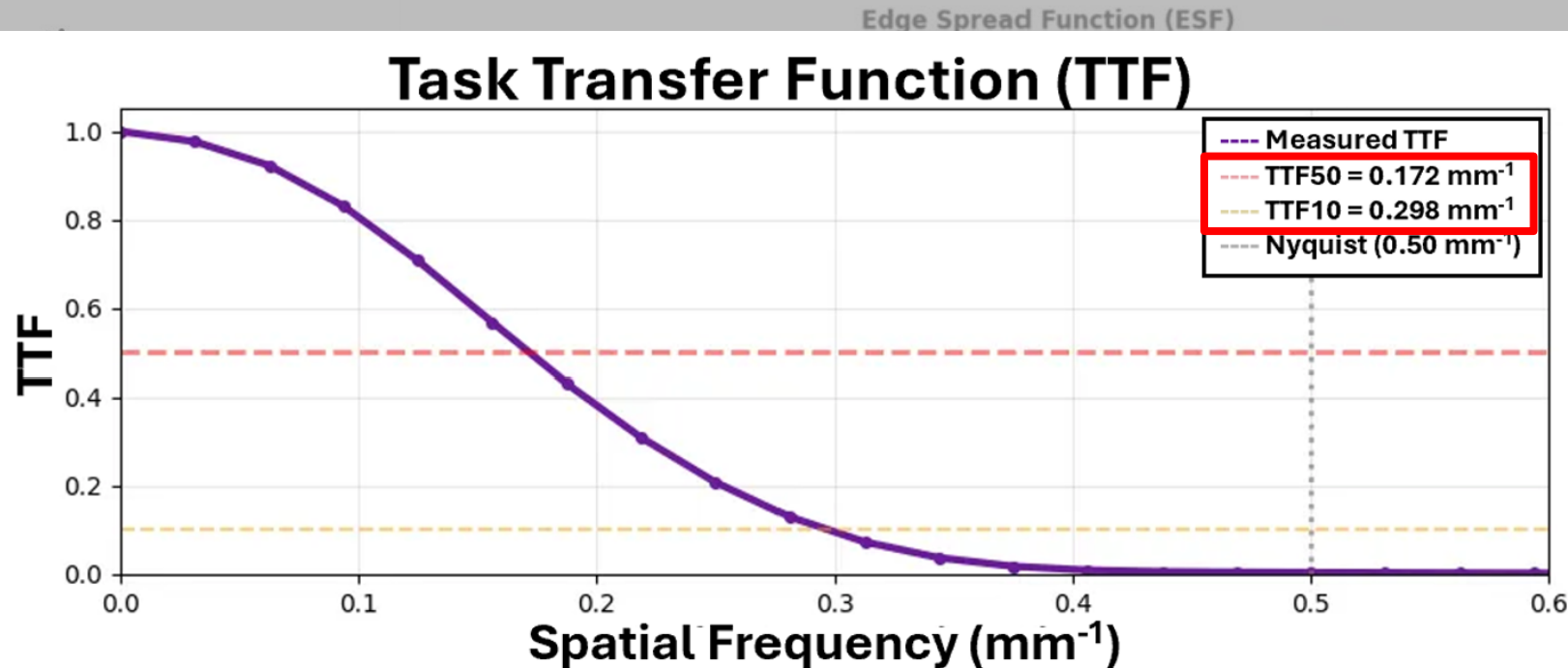
Phantom-Free Task Transfer Function

- TTF quantifies spatial resolution: system response vs. spatial frequency

Algorithm:

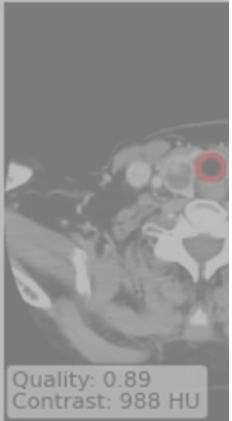
1. Hough circle detection (>200 HU contrast) $\rightarrow$ 180 radial profiles $\rightarrow$ ESF $\rightarrow$ LSF $\rightarrow$ Fourier transform $\rightarrow$ TTF
2. Uses vessels, trachea, airways as built-in edge phantoms
3. Captures real imaging conditions: patient motion, physiology, positioning — absent in phantom measurements
4. Validation: vessel quality score 0.89, $\text{TTF}_{50} = 0.17 \text{ mm}^{-1}$, $\text{TTF}_{10} = 0.30 \text{ mm}^{-1} \rightarrow$ smooth soft tissue kernel confirmed

Phantom-Free Task Transfer Function



TTF Structure

(Trac



Conclusion

- AnatomIQ automates the full CT IQ pipeline — PACS screenshot to comprehensive analysis in 2–3 minutes
- Eliminates operator-dependent variability in CNR background selection (>15% reduction)
- First open-source toolkit to perform both NPS and TTF directly from in vivo patient anatomy — no phantom, no additional radiation
- Anatomical TTF captures real imaging conditions absent from phantom measurements



Acknowledgements



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David Hunter, MS



Kevin Willy, BS



Natasha Mulenga, BS



Hayley Cash, MS